

LET'S GET HEALTHY CALIFORNIA TASK FORCE

Task Force and Expert Advisor Group Meeting
Friday, September 28th, 2012



Let's Get Healthy California Task Force





WELCOME

Let's Get Healthy California Task Force Meeting



Let's Get Healthy California Task Force

OPENING REMARKS

Let's Get Healthy California Task Force Co-Chairs
Diana S. Dooley, Secretary
California Health and Human Services Agency

Donald M. Berwick MD, MPP, FRCP



The Charge

*“What will it take for California
to be the healthiest state
in the nation?”*

Diana Dooley, Secretary
California Health and Human Services Agency
June 11, 2012



OVERVIEW AND DRAFT FRAMEWORK & DASHBOARD

Patricia E. Powers, MPA

Director

Let's Get Healthy California Task Force



Let's Get Healthy California Task Force

Executive Order B-19-12

- Prepare a 10-year plan that will:
 - Improve the health of Californians
 - Control health care costs
 - Promote personal responsibility for health
 - Advance health equity
 - Not involve additional government spending
- Key Plan Components
 - Establish baselines for key health indicators and standards for measuring improvement over a 10-year period
 - Seek to reduce diabetes, asthma, childhood obesity, hypertension, sepsis-related mortality, hospital readmissions within 30-days of discharge, and increase the number of children receiving recommended vaccinations by age three
 - Identify obstacles for better health care



Guiding Principles

- (1) All recommendations shall be based on the best available evidence.
- (2) Addressing the challenges will require recognition of policies emphasizing the important roles that education, housing, transportation, the workplace, and other sectors play in promoting healthy individuals living in healthy communities.
- (3) Particular focus should be given to reducing the inequalities in health status and health care focusing on vulnerable populations and communities in the state.



Guiding Principles

- (4) The recommendations should aim to control health care costs and be fiscally prudent.
- (5) The recommendations should include opportunities to promote personal responsibility for individual health.
- (6) The recommendations should consider the strategies for implementation, sustainability over time, and diffusion and spread throughout the state.



Guiding Principles

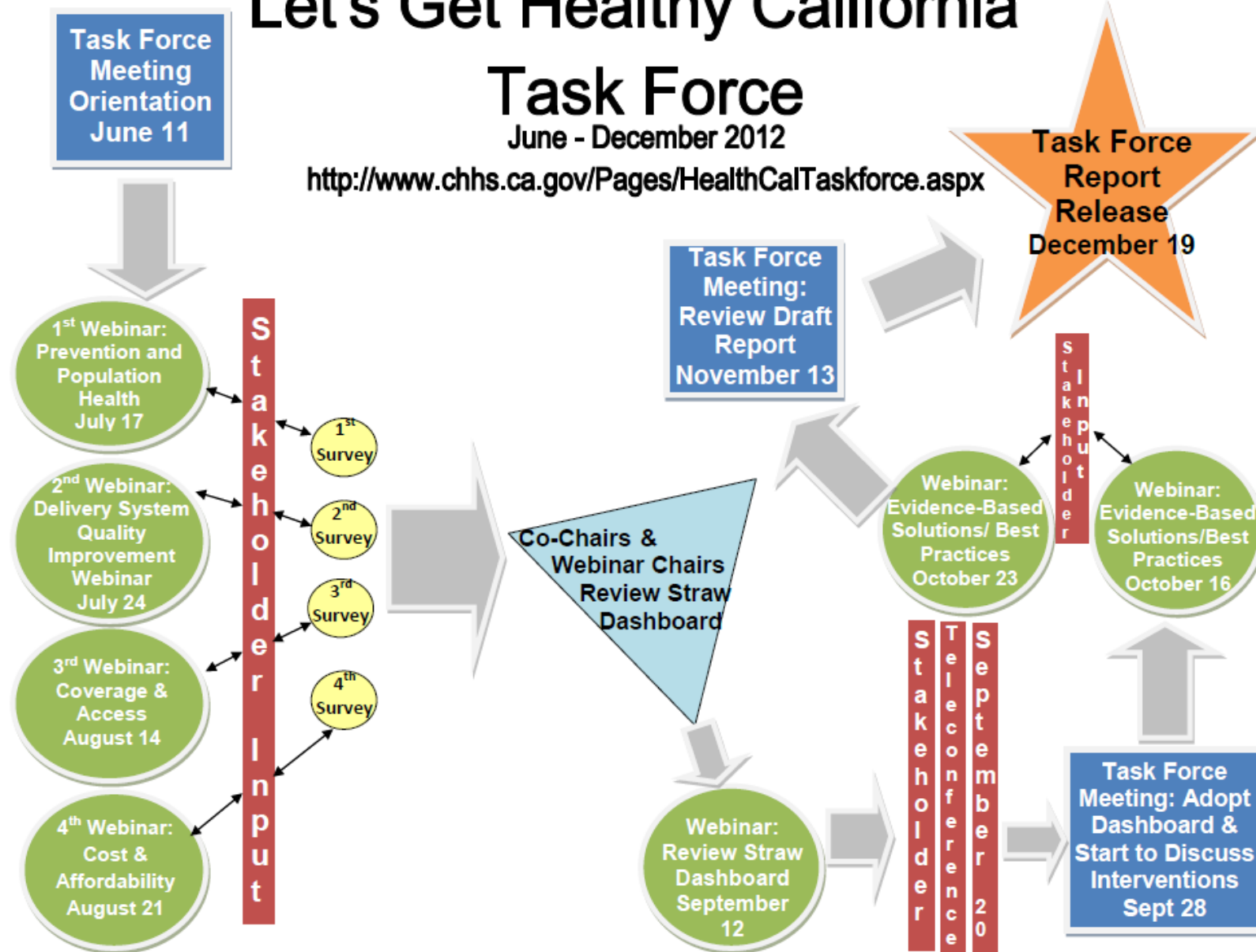
- (7) All recommendations should have associated with them performance indicators to assess degree of achievement over time.
- (8) The recommendations should serve as a long-run agenda for the state that transcends changes in public and private sector leadership while taking into account that as some of the objectives are achieved and sustained, they may be replaced by other objectives, and that changes in leadership also bring fresh new perspectives for making California the healthiest state in the nation.



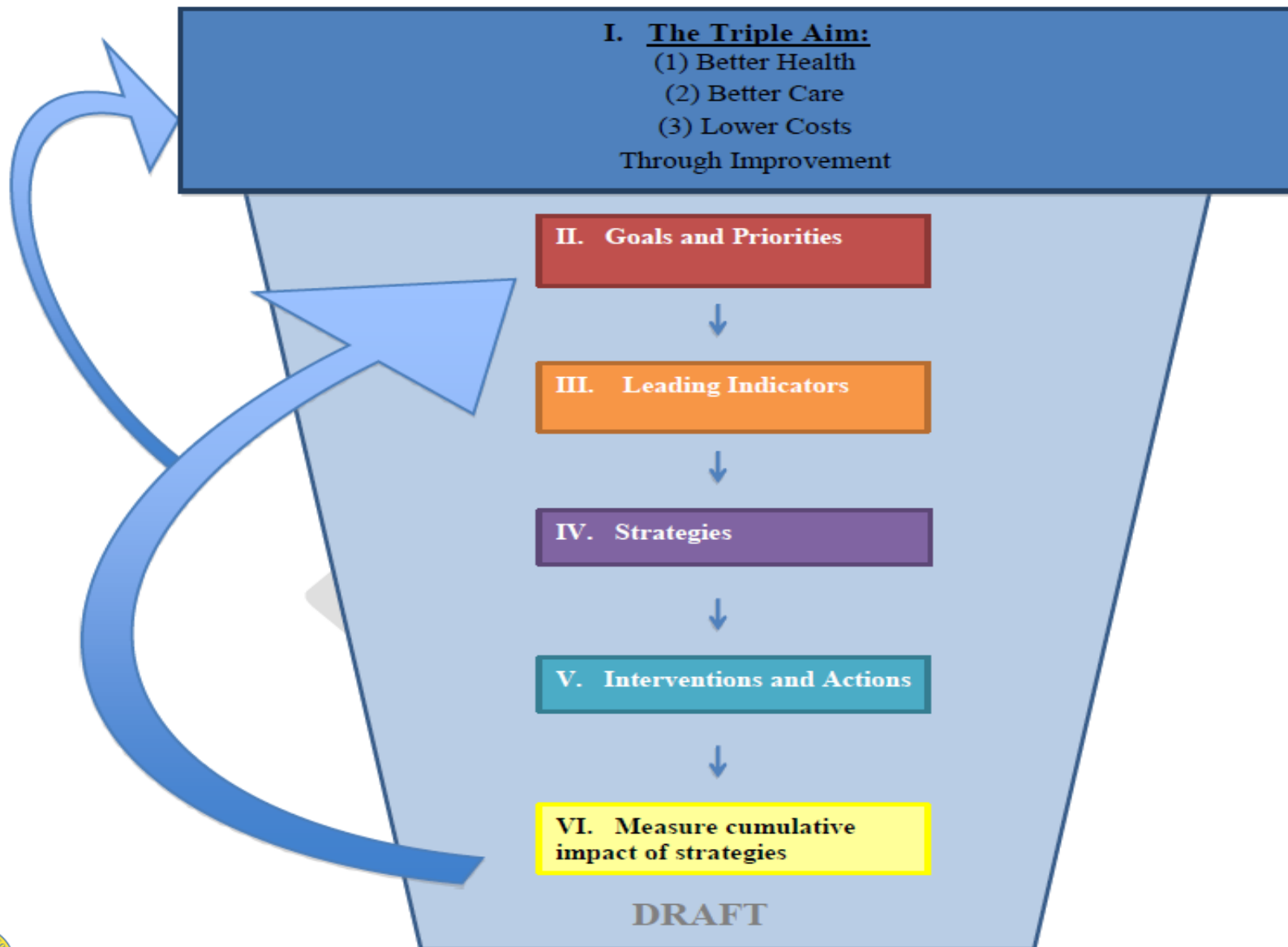
Let's Get Healthy California Task Force

June - December 2012

<http://www.chhs.ca.gov/Pages/HealthCalTaskforce.aspx>



Let's Get Healthy California Draft Framework



Process and Rationale

- Four main inputs
 - Executive Order
 - Survey Results
 - Expert Advice
 - Availability of Data

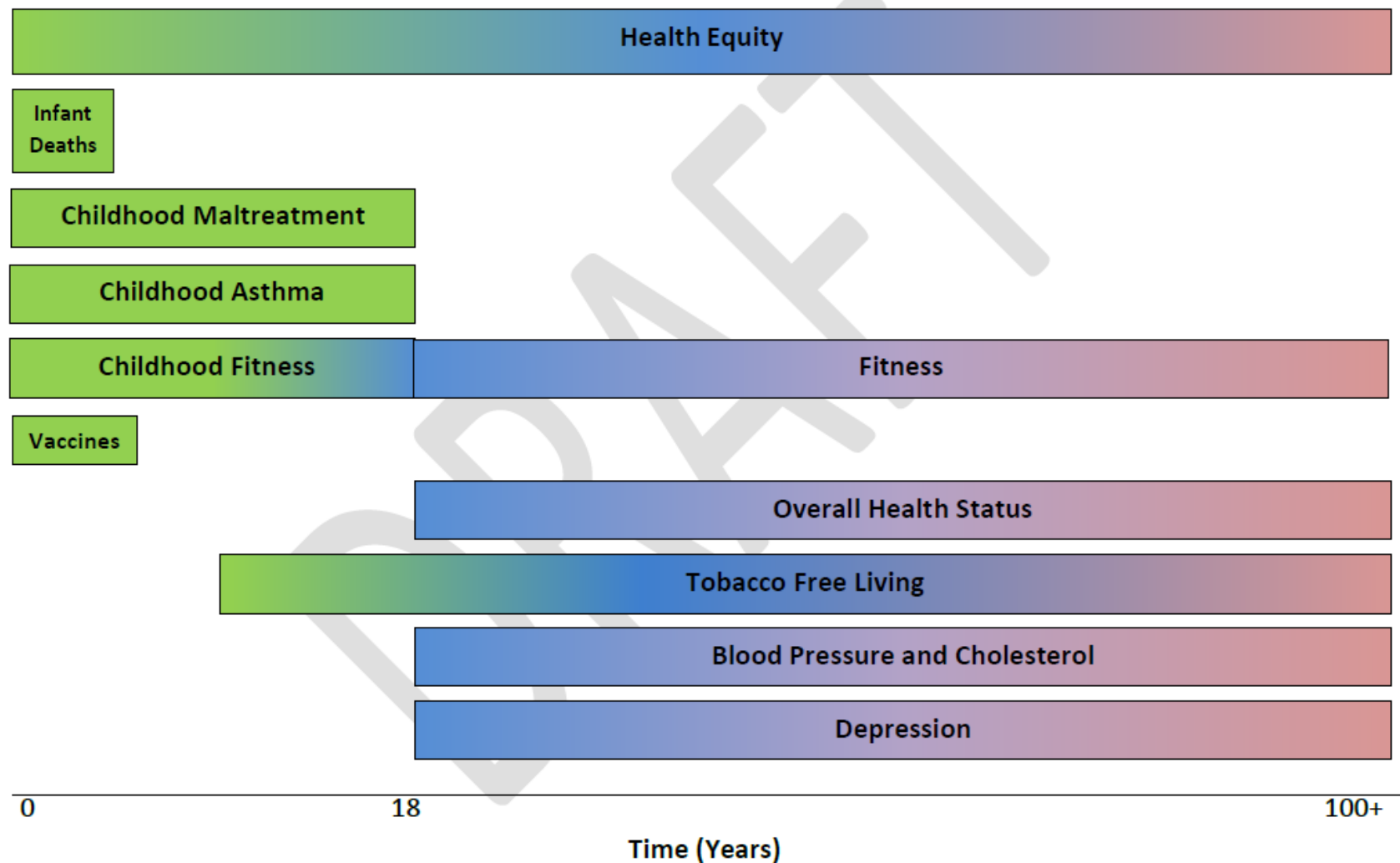


Task Force Goals

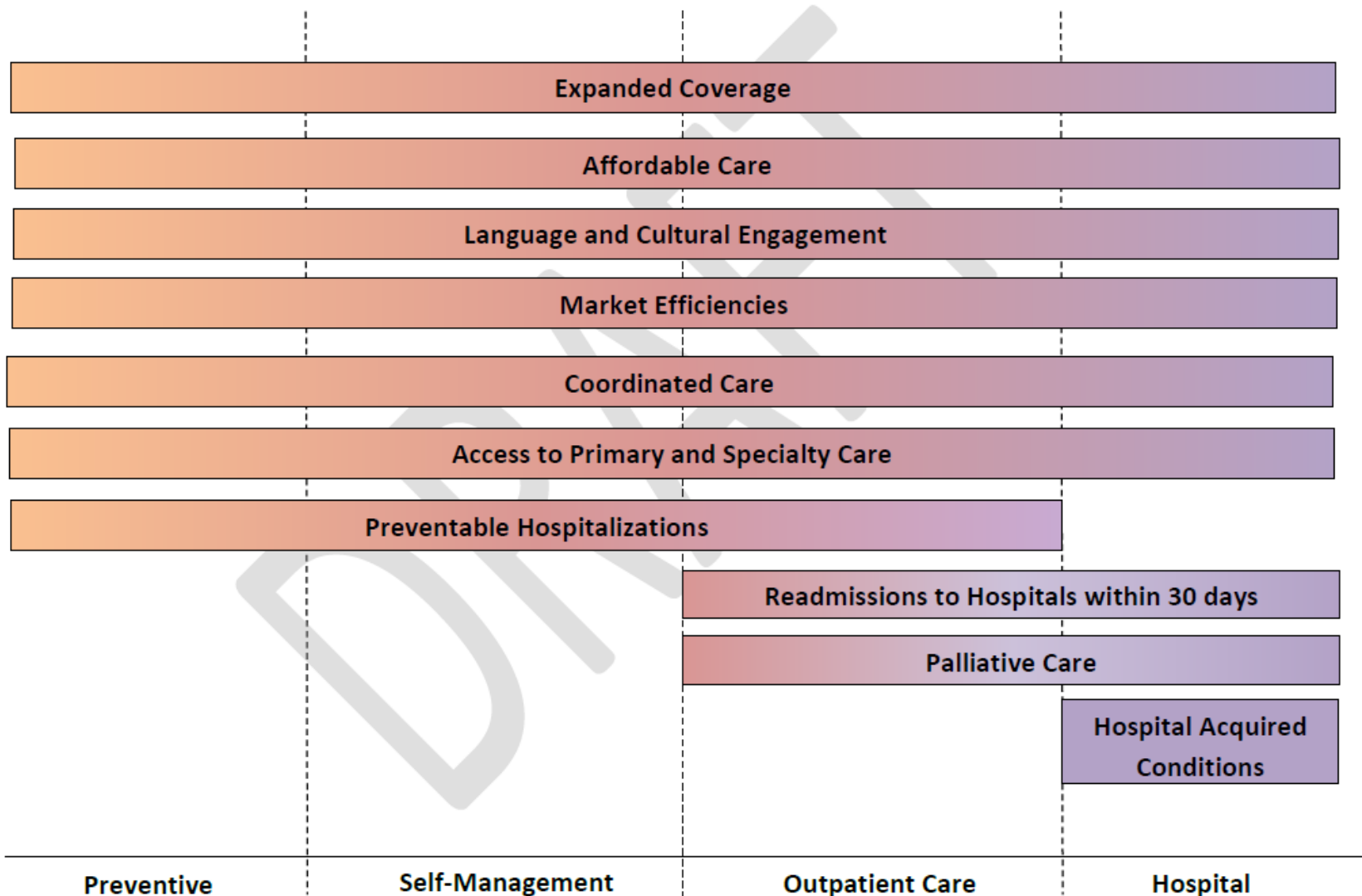
- Overarching Goal: Triple Aim
 1. Improving the Health of the Population/
Healthy Lives
 - ❖ Healthy Beginnings
 - ❖ Preventing and Managing Chronic Disease
 - ❖ Health Equity
 2. Aligning the Health System: Efficient, Safe
and Patient-Centered
 - ❖ Affordable Coverage
 - ❖ Health Care Delivery System Improvement
 - ❖ Financing Reform



Improving the Health of the Population / Healthy Lives



Aligning the Health System: Efficient, Safe, and Patient-Centered



DRAFT: Improving the Health of the Population/Healthy Lives:

1. Healthy Beginnings

	Leading Indicator	CA Baseline	2022 CA Target	National Baseline	2020 National Target	Equity
1. Healthy Beginnings						
1	Infant Mortality, Deaths per 1,000 Live Births	4.7	White/Asian 4.1	6.75	Not Available	Af. Am.: 10.6
2	Respondents indicating at least 1 type of Adverse Childhood Experiences	59.4%	Other: ³ 45.1%	Not Available	Not Available	White: 62.1%
3	Reduce Incidents of nonfatal child maltreatment (including physical, psychological, neglect, etc.) per 1,000 children	9.4	Asian/P.I.: 2.8	9.4	8.5	Af. Am.: 24.5
4	Lifetime asthma, 0-17 years	14.2%	Latino: 13.3%	13.8%	Not Available	Af. Am.: 20.4%
5	Hospital Admissions for asthma, 0-17 years per 10,000	11.0	Asian/P.I.: 7.1	27	Not Available	Af. Am.: 33.6
6	Emergency department visits, 0-17 years due to asthma per 10,000	72.6	Asian/P.I.: 28	103	Not Available	Af. Am.: 236.2

¹Proposed 2022 CA targets for improvement are the score for the best ranking race/ethnicity group for indicators for which race/ethnicity data is available. The following abbreviations were used: Af. Am.: African American; Am In/AK Nat.: American Indian/Alaska Native; Hisp./Lat.: Hispanic/Latino; 2+ Races: Two or more races; P.I.: Pacific Islander

²Race/Ethnicity Disparities represent the score for the worst ranking race/ethnicity group for indicators for which race/ethnicity data is available

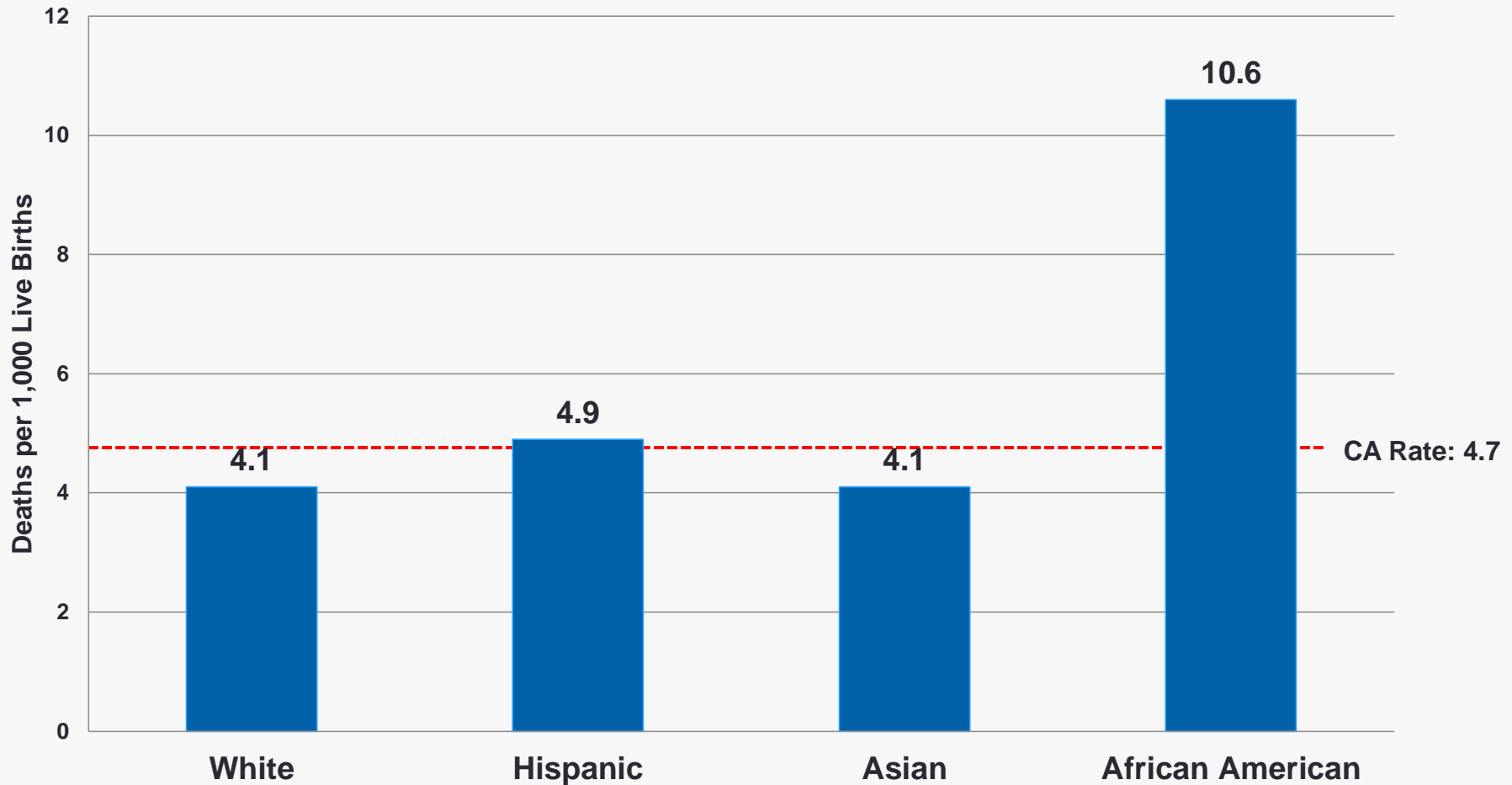
³Represents a combination of Asian, Hawaiian/Pacific Islander, and Native American/Alaska Native

⁴Based on RFEI data from higher rated census tract in Marin County, selected for highest overall RFEI county score



Race/Ethnic Disparities: Infant Mortality

Infant Mortality, Deaths per 1,000 Live Births, 2010



DRAFT: Improving the Health of the Population/Healthy Lives:

1. Healthy Beginnings

	Leading Indicator		CA Baseline	2022 CA Target	National Baseline	2020 National Target	Equity
1. Healthy Beginnings							
7	Proportion of children and adolescents who are obese	2-5 yrs.	12.4%	White: 9.4%	10.7%	9.6%	Hisp./Lat: 15.4%
		6-11 yrs.	12.2%	2+ Races: 7.6%	17.4%	15.7%	Hisp./Lat.: 16.1%
		12-19 yrs.	18.0%	Asian: 11.5%	18.0%	16.1%	Hisp./Lat.: 23.7%
8	Percentage of “physically fit” children, who score 6 of 6 on the required California school Fitness-gram test	5 th graders	25.2%	White: 35.6%	Not Available	Not Available	Hisp./Lat.: 18.5%
		7 th graders	32.1%	Asian: 45.8%	Not Available	Not Available	Hisp/Lat, P.I: 25.3%
		9 th graders	36.8%	Asian: 52.2%	Not Available	Not Available	P.I.: 27.0%
9	Proportion of adolescents who meet physical activity guidelines for aerobic physical activity		15.2%	Af. Am.: 23.7%	18.4%	20.2%	Asian: 8.8%
10	Adolescents who drank 2 or more glasses of soda or other sugary drink yesterday		27.3%	Asian: 17.4%	19.7%	Not Available	2+ Races: 38.4%
11	All doses of recommended vaccines for children 19-35 months		68%	80%	70%	80%	Not Available
12	Proportion of adolescents who smoked cigarettes in the past 30 days		13.8%	Asian/P.I.: 10.3%	19.5%	16.0%	White: 14.7%

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DRAFT : Improving the Health of the Population/Healthy Lives:

2. Preventing and Managing Chronic Disease and 3. Health Equity

	Leading Indicator		CA Baseline	2022 CA Target	National Baseline	2020 National Target	Equity
2. Preventing and Managing Chronic Disease							
13	Overall health status reported to be good or better		84.7%	2+ Races: 90.4	TBD	TBD	Am In/AK Nat: 75.3%
14	Proportion of adults who are obese		23.8%	Other ³ : 10.8%	34.0%	30.6%	Af. Am.: 33.1%
15	Number of healthy food outlets as measured by Retail Food Environment Index		11%	33% ⁴	10	Not Available	Not Available
16	Proportion of adults who meet physical activity guidelines for aerobic physical activity		58.2%	MultiRacial: 66.0%	43.5%	47.9%	Hisp./Lat.: 50.0%
17	Proportion of adults who are current smokers	Overall	12%	Asian/P.I.: 8.5%	20.6%	12%	Af. Am.: 17.0%
		Men	14.9%	Asian/P.I.: 13.1%	TBD	TBD	Af. Am.: 18.9%
		Women	9.3%	Asian/P.I.: 4.5%	TBD	TBD	Af. Am.: 15.2%
18	Percent of adults diagnosed with hypertension who have controlled high blood pressure		Medicare 79% PPOs 50% HMOs 78%	Medicare 87% PPOs 70% HMOs 86%	46%	65% by 2017	Not Available
19	Percent of adults diagnosed with high cholesterol who are managing the condition		Medicare 76% PPOs 50% HMOs 70%	Medicare 91% PPOs 70% HMOs 84%	33%	65% by 2017	Not Available
20	Proportion of adolescents (12-17 years old) and adults (18 years and older) who experience major depressive episode (MDE)	Adolescents	8.2%	7.3%	8.3%	7.4%	Not Available
		Adults	6.0%	5.4%	6.8%	6.1%	
3. Health Equity							
21	Identify geographic hotspots		Some Available	Some Available	Some Available	Some Available	Not Available

¹Proposed 2022 CA targets for improvement are the score for the best ranking race/ethnicity group for indicators for which race/ethnicity data is available. The following abbreviations were used: Af. Am.: African American; Am In/AK Nat.: American Indian/Alaska Native; Hisp./Lat.: Hispanic/Latino; 2+ Races: Two or more races; P.I.: Pacific Islander

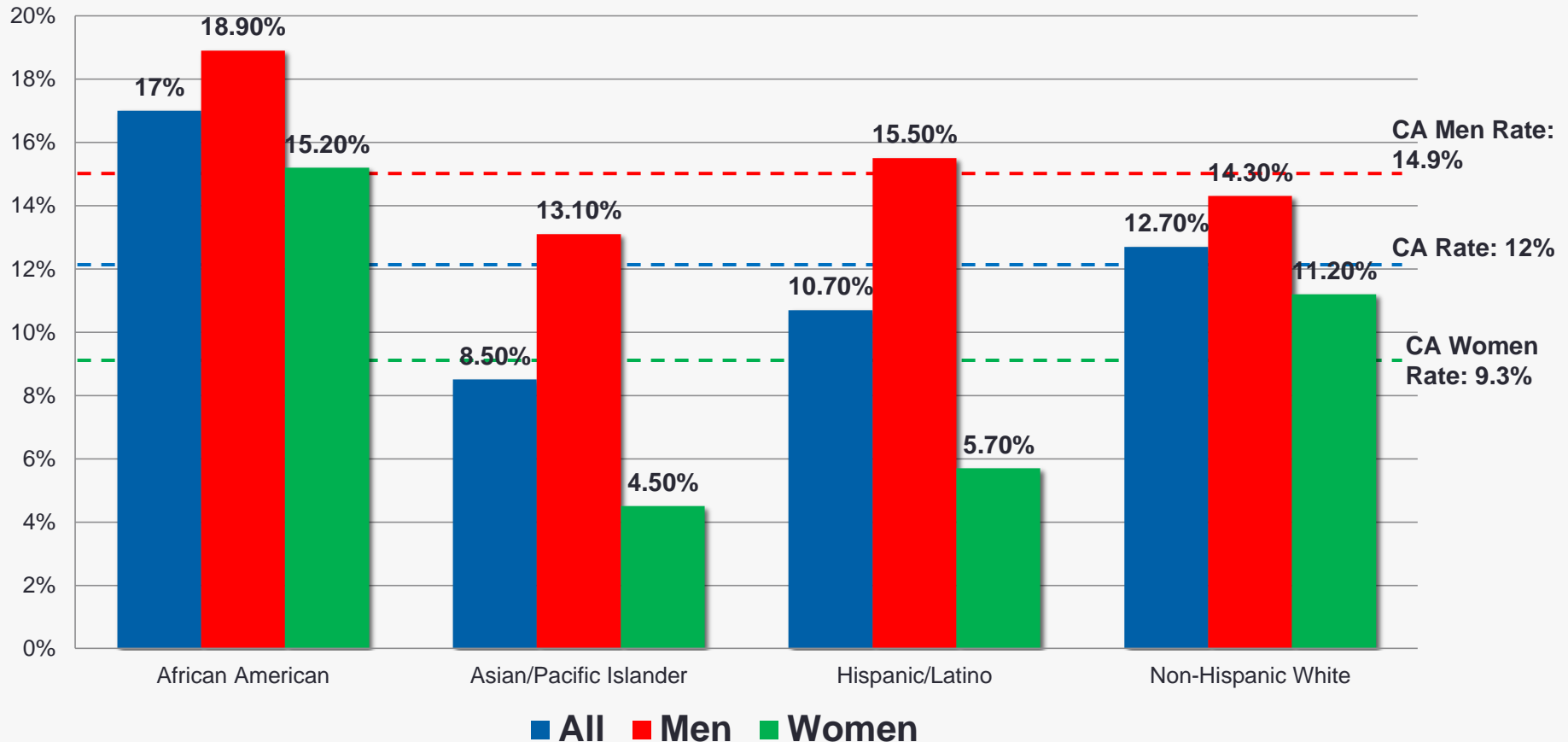
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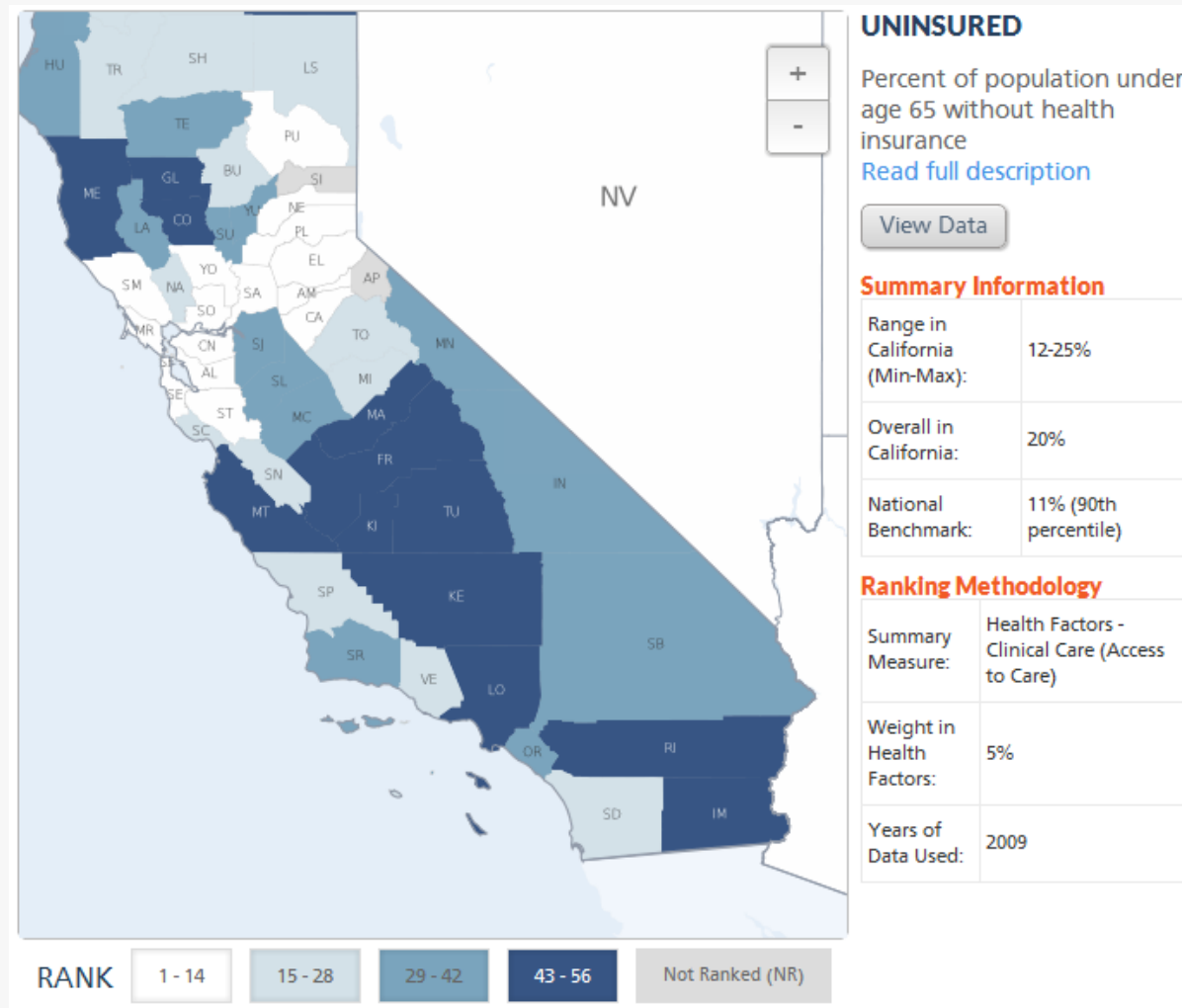
⁴Based on RFEI data from higher rated census tract in Marin County, selected for highest overall RFEI county score

Gender Inequalities: Tobacco Use

Adults who are Current Smokers



Geographic Disparities: Uninsurance



DRAFT : Aligning the Health System: Efficient, Safe, and Patient-Centered Care

4. Affordable Coverage

	Indicator	CA Baseline	2022 CA Target	National Baseline	2020 National Target	Equity
4. Affordable Coverage						
22	Uninsurance rate	14.5%	2+ Races: 8.4%	15.3%	TBD	Am In/AK Nat: 23.1%
23	Uninsured at some point in the past year	21.2%	White: 14%	19.8%	TBD	Am In/AK Nat: 31.4%
24	Uninsured for a year or more	11.3%	White: 6.4%	11.2%	TBD	Am In/AK Nat: 21.2%
25	Percent of population less than 65 that spends more than 10% of income on health care expenses	TBD	TBD	TBD	TBD	Not Applicable
26	Compound Annual Growth Rate (CAGR) by total health expenditures and per capita costs. For comparison, CAGR by Gross State Product is included	Total: 7.26% Per Capita: 6.27% GSP: 3.69%	0% growth	TBD	TBD	Not Applicable

¹Proposed 2022 CA targets for improvement are the score for the best ranking race/ethnicity group for indicators for which race/ethnicity data is available. The following abbreviations were used: Af. Am.: African American; Am In/AK Nat.: American Indian/Alaska Native; Hisp./Lat.: Hispanic/Latino; 2+ Races: Two or more races; P.I.: Pacific Islander

²Race/Ethnicity Disparities represent the score for the worst ranking race/ethnicity group for indicators for which race/ethnicity data is available



DRAFT : Aligning the Health System: Efficient, Safe, and Patient-Centered Care

5. Health Care Delivery System

	Indicator		CA Baseline	2022 CA Target	National Baseline	2020 National Target	Equity
5. Health Care Delivery System							
27	Percent of people who had difficulty finding a provider that would accept new patients (primary care, specialty care)		Not Available	Not Available	Not Available	Not Available	Not Available
22	Preventable Hospitalizations, per 100,000 population		TBD	TBD	1,434	Top 3 state: 818	Not Available
29	Linguistic and cultural engagement		Not Available	Not Available	Not Available	Not Available	Not Available
30	All-payer 30-day readmission rate		TBD	TBD	14.4%	12% by 2013	Not Available
31	Incidence of measureable hospital-acquired conditions		TBD	TBD	145 HACs per 1,000 admissions	Reduce preventable HACs by 40% by the end of 2013	Not Available
32	Hospital Days during the Last Six Months of Life ³		10.6	Non-black: 10.1	10.3	Not Available	Black: 15.2
33	Percent of patients whose doctor’s office helps coordinate their care with other providers or services	Child/ Adolescent	67.2%	94%	69%	None Set	Not Available
		Adult HMO	75%				

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²Race/Ethnicity Disparities represent the score for the worst ranking race/ethnicity group for indicators for which race/ethnicity data is available

⁴Denominator: 100% of Medicare enrollees age 65-99 who died during the measurement year with full Part A entitlement and no HMO enrollment during the measurement period.

DRAFT : Aligning the Health System: Efficient, Safe, and Patient-Centered Care

6. Financing

	Indicator	CA Baseline	2022 CA Target	National Baseline	2020 National Target	Equity
6. Financing						
34	High numbers of people in population managed health plans	48.3%	Af. Am: 61.0%	TBD	TBD	Am In/AK Nat: 41.0%
35	Transparent information on both the cost and quality of care	TBD	TBD	TBD	TBD	Not Available
36	Most care is supported by payments that reward value	Not Available	Not Available	Not Available	Not Available	Not Available

¹Proposed 2022 CA targets for improvement are the score for the best ranking race/ethnicity group for indicators for which race/ethnicity data is available. The following abbreviations were used: Af. Am.: African American; Am In/AK Nat.: American Indian/Alaska Native; Hisp./Lat.: Hispanic/Latino; 2+ Races: Two or more races; P.I.: Pacific Islander

²Race/Ethnicity Disparities represent the score for the worst ranking race/ethnicity group for indicators for which race/ethnicity data is available

⁴Denominator: 100% of Medicare enrollees age 65-99 who died during the measurement year with full Part A entitlement and no HMO enrollment during the measurement period.



A Word about the Social Determinants of Health

Social-Physical-Economic-Services Determinants

- Income & income inequality
- Education
- Race/ethnicity/gender & related discrimination
- Built Environment
- Stress
- Social support
- Early child experiences
- Employment
- Housing
- Transportation
- Food Environment
- Social standing

APPENDIX: DATA SOURCES



SAMPLE: Improving the Health of the Population/Healthy Lives

Leading Indicator		CA Source	CA Source Detail	National Source
Objective: Healthy Beginnings				
1	Infant Mortality, Deaths per 1,000 Live Births	CDPH Birth and Death Records, Vital Statistics Query System 2010; California Birth and Death Statistical Master Files 2000-2010	County Level; Race/Ethnicity; Age of Infant	National Vital Statistics System - Linked Birth and Infant Death Data (NCHS, NVSS n.d.). Reported in the 2005 and 2007 CDC Health, United States publication
2	Respondents indicating at least 1 type of Adverse Childhood Experiences	Behavioral Risk Factor Surveillance System 2008 & 2009 combined, CDPH, Not currently collected	State, county can be determined; Race/Ethnicity; Age; Gender; Income; Education	Not Available
3	Incidence of substantiated allegations for child maltreatment, rates per 1,000 children	CA Department of Social Services, CWS/CMS Dynamic Report System, 2011	County Level; Race/Ethnicity, Age, Gender	National Child Abuse and Neglect Data System, 2008; Annual data collection
4	Ever diagnosed with asthma, 0-17 years	California Health Interview Survey 2009, Biennial survey	Some County, Race/Ethnicity; Age; Gender, Income	National Health Interview Survey, 2009; continuous collection
5	Hospital Admissions for asthma, 0-17 years per 10,000	State of California, California Department of Public Health, California Breathing, using OSHPD Emergency Department Data, 2010	County Level; 2010; Zip code; Payer type; Race/Ethnicity; Gender; Age	National Hospital Discharge Survey, 2004; collected annually, 1965-2010
6	Emergency department visits, 0-17 years due to asthma per 10,000	State of California, California Department of Public Health, California Breathing, using OSHPD Emergency Department Data, 2010	County Level; 2010; Zip code; Payer type; Race/Ethnicity; Gender; Age	National Hospital Ambulatory Medical Care Survey, 2004
7	Proportion of children and adolescents who are obese	California Health Interview Survey 2009, Biennial survey	Some County, Race/Ethnicity; Age; Gender, Income	National Health and Nutrition Examination Survey, Centers for Disease Control and Prevention, National Center for Health Statistics
8	Percentage of "physically fit" children, who score 6 of 6 on the required California school Fitness-gram test	California Department of Education Dataquest; 2010-2011 California Fitness Report; Meeting HFZ Summary Report; Ethnicity Summary Report; collected annually	Statewide, County, District Level; Gender; Grade Level; Economic Groupings	No Comparable Measure
9	Proportion of adolescents who meet physical activity guidelines for aerobic physical activity	California Health Interview Survey 2009, Biennial survey	Some County, Race/Ethnicity; Age; Gender, Income	National Prevention Council, <i>National Prevention Strategy</i> , Washington, DC:
10	Adolescents who drank 2 or more glasses of soda or other sugary drink yesterday	California Health Interview Survey 2009, Biennial survey	Some County, Race/Ethnicity; Age; Gender, Income	YBRS 2009
11	All doses of recommended vaccines for children 19-35 months	National Immunization Survey, 2010 Ongoing collection	Some Counties; Race/Ethnicity; Date of vaccination	National Immunization Survey, 2010 , Ongoing collection
12	Proportion of adolescents who smoked cigarettes in the past 30 days	2010 California Youth Tobacco Survey, Biennial survey	County Level	National Prevention Council, National Prevention Strategy, Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General, 2011



SAMPLE: Improving the Health of the Population/Healthy Lives

Leading Indicator		CA Source	CA Source Detail	National Source
Objective: Preventing and Managing Chronic Disease				
13	Overall health status reported to be Good or better	California Health Interview Survey 2009 Biennial survey	Some County; Race/Ethnicity; Age; Gender; Income	National Health Interview Survey, Continuous Collection
14	Proportion of adults who are obese	Behavioral Risk Factor Surveillance System 2011, ongoing collection	Some County; Race/Ethnicity; Age; Gender; Income; Education	National Health and Nutrition Examination Survey, Centers for Disease Control and Prevention, National Center for Health Statistics
15	Number of healthy food outlets as measured by Retail Food Environment Index	CDC State Indicator Report on Fruits and Vegetables, 2009, indicators derived from HP 2020 objectives; and CDC Children's Food Environment State Indicator Report, 2011	Census Tract Level	CDC State Indicator Report on Fruits and Vegetables, 2009, indicators derived from HP 2020 objectives; and CDC Children's Food Environment State Indicator Report, 2011
16	Proportion of adults who meet physical activity guidelines for aerobic physical activity	Behavioral Risk Factor Surveillance System 2011, ongoing collection	State, county can be determined; Race/Ethnicity; Age; Gender; Income; Education	National Prevention Council, National Prevention Strategy, Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General, 2011
17	Proportion of adults who are current smokers	Behavioral Risk Factor Surveillance System 2011, ongoing collection	State, county can be determined; Race/Ethnicity; Age; Gender; Income; Education	National Prevention Council, National Prevention Strategy, Washington, DC: U.S. Department of Health and Human Services, Office of the Surgeon General, 2011
18	Percent of adults diagnosed with hypertension who have controlled high blood pressure	Statewide and Health Plan Specific Data, 2011	Plan Specific	Centers for Disease Control and Prevention, National Health and Nutrition Examination Survey (NHANES), 2005-2008
19	Percent of adults diagnosed with high cholesterol who are managing the condition	Statewide and Health Plan Specific Data, 2011	Plan Specific	Centers for Disease Control and Prevention, National Health and Nutrition Examination Survey (NHANES), 2005-200
20	Proportion of adolescents (12-17 years old) and adults (18 years and older) who experience major depressive episode (MDE)	National Survey on Drug Use and Health, Substance Abuse and Mental Health Services Administration	No county level	National Survey on Drug Use and Health, Substance Abuse and Mental Health Services Administration
Objective: Health Equity				
21	Identify geographic hotspots	Indicator Not Available	Some Available	Some Available



SAMPLE: Aligning the Health System: Efficient, Safe and Patient-Centered Care

Leading Indicator		CA Source	CA Source Detail	National Source
Objective: Affordable Coverage				
22	Uninsurance rate	California Health Interview Survey 2009, Biennial survey	Some County, Race/Ethnicity, Age; Gender, Income	National Health Interview Survey 2011; continuous collection
23	Uninsured at some point in the past year	California Health Interview Survey 2009, Biennial survey	Some County, Race/Ethnicity, Age; Gender, Income	National Health Interview Survey 2011; continuous collection
24	Uninsured for a year or more	California Health Interview Survey 2009, Biennial survey	Some County, Race/Ethnicity, Age; Gender, Income	National Health Interview Survey 2011; continuous collection
25	Percent of population less than 65 that spends more than 10% of income on health care expenses	Medical Expenditure Panel Survey, data to be analyzed	National Level; State Level and Metropolitan Areas	Medical Expenditure Panel Survey, data to be analyzed
26	Compound Annual Growth Rate (CAGR) by total health expenditures and per capita costs	CMS State Health Expenditures, 2000-2009	National Level; State Level	CMS State Health Expenditures, 2000-2009
Objective: Health Care Delivery System				
27	Percent of people who had difficulty finding a provider that would accept new patients (primary care, specialty care)	Indicator Not Available	Not Available	Indicator Not Available
28	Preventable Hospitalizations	State of California, Office of Statewide Health Planning and Development, Healthcare Information Division, AHRQ – Prevention Quality Indicators (PQIs) generated from the Inpatient Discharge Data	County Level; Zip code; Payer type; Race/Ethnicity, Gender, Age	Agency for Healthcare Research and Quality (AHRQ), Healthcare Cost and Utilization Project, Nationwide Inpatient Sample, and AHRQ Quality Indicators, modified version 4.1, 2000-2008
29	Linguistic and cultural engagement	Indicator Not Available	Not Available	Indicator Not Available
30	All-payer 30-day readmission rate	State of California, Office of Statewide Health Planning and Development, Healthcare Information Division, Inpatient Discharge Data	County Level; Zip code; Payer type; Race/Ethnicity, Gender, Age	Centers for Medicare and Medicaid Services, March 2012
31	Incidence of measureable hospital-acquired conditions	AHRQ – Patient Safety Indicators Composite, OSHPD Forthcoming	County Level; Zip code; Payer type; Race/Ethnicity, Gender, Age	Agency for Healthcare Research and Quality, Version 4.4
32	Hospital Days during the Last Six Months of Life	The Dartmouth Atlas, 2007	State Level, Gender, Race/Ethnicity	The Dartmouth Atlas, 2007
33	Percent of patients whose doctor's office helps coordinate their care with other providers or services	California Health Interview Survey Adolescent Survey, California Health Interview Survey Child Survey Biennial survey; Integrated Healthcare Association 2011	Some County, Race/Ethnicity, Age; Gender, Income	Health Resources and Services Administration, Maternal and Child Health Bureau; Centers for Disease Control and Prevention, National Center for Health Statistics, National Survey of Children's Health, 2007



SAMPLE: Aligning the Health System: Efficient, Safe and Patient-Centered Care

Objective: Financing				
34	High numbers of people in population managed health plans	California Health Interview Survey 2009 Biennial survey	Some County, Race/Ethnicity; Age; Gender, Income	TBD
35	Transparent information on both the cost and quality of care	Indicator Not Available	Not Available	Indicator Not Available
36	Most care is supported by payments that reward value	Not Available	Not Available	Not Available



Contact information:

- Website:
<http://www.chhs.ca.gov/Pages/HealthCaTaskforce.aspx>
- Comments:
 - Please submit additional comments to Sonia Robinson
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